1. **Instructional approaches focused on using knowledge**
Use students’ knowledge in real time through experiential learning in the clinical environment. Work with your strategic health care partners to identify concepts in patient care that focus on a course learning outcome and can be best experienced in the real-life clinical environment or through the clinical simulation experience. Identify two to three students who will have this unique patient care experience each week. Use effective debriefing in post-clinical to the NLN Guide to Teaching Thinking. Move from highly structured teacher led sessions to critically reflective group conversation: reviewing group think; discussing differing rationales and thinking behind actions taken; comparing and contrasting ideas.

2. **Simulating clinic-like situations**
Educators have turned to simulation as a way to provide rich learning experiences that can replicate actual clinical experiences. Simulation can standardize clinical experiences in this time of unpredictable and often unequal clinical learning opportunities. Identifying low acuity – high frequency practice situations (e.g., diabetic hypoglycemia, post-op infection, etc.) vs. high acuity low frequency (e.g., cardiac or respiratory arrest) can enhance the quality of the learning experience. Identify the nursing concepts that are vitally important as experiences for students at different stages of their nursing education. Map out the simulation vs real-life clinical opportunities across the curriculum map.

3. **Contextualizing learning**
Contextualized learning brings classroom and clinical together – engaging the learners with diverse perspectives to reflect and reframe the understanding of practice, bringing thinking and doing together. Concept-based curricula can target important clinical and leadership concepts, such as fluid balance, infection, oxygenation, or prioritization, or delegation. Providing ALL students with the opportunity to use their thinking and reasoning skills in simulation reduces the burden in real-life clinical of having to assure that all students will get these foundational experiences. Mapping out concepts across the curriculum and identifying simulation scenarios that target specific conceptual learning outcomes assures that all students have the same clinical care experience of these important nursing concepts and helps faculty better prepare to assess learning outcomes (i.e., fundamental students: infection, metabolism, safety; or intermediate students:
oxygenation, ventilation, fluid balance, etc.). The **debriefing conversations** can be structured to emphasize and highlight important care issues.